

PATENT APPLICATION FEE DETERMINATION RECORD  
Effective October 1, 2003

Application or Docket Number

10/700828

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

|                                  |              |                          |
|----------------------------------|--------------|--------------------------|
| TOTAL CLAIMS                     | 21           |                          |
| FOR                              | NUMBER FILED | NUMBER EXTRA             |
| TOTAL CHARGEABLE CLAIMS          | 21 minus 20= | * 1                      |
| INDEPENDENT CLAIMS               | 3 minus 3 =  | *                        |
| MULTIPLE DEPENDENT CLAIM PRESENT |              | <input type="checkbox"/> |

SMALL ENTITY  
TYPE  OTHER THAN  
OR SMALL ENTITY

|           |        |              |        |
|-----------|--------|--------------|--------|
| RATE      | FEES   | RATE         | FEES   |
| BASIC FEE | 385.00 | OR BASIC FEE | 770.00 |
| X\$ 9=    |        | OR X\$18=    | 18     |
| X43=      |        | X86=         |        |
| +145=     |        | +290=        |        |
| TOTAL     |        | OR TOTAL     | 788    |

\* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

| AMENDMENT A                                    | 12/5/05 | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |
|--|---------|---|-------|---|------------------|
|  |         |   |       | Minus                                       | =                |
| Total  | *       | 21  | Minus | ** 21                                       | =                |
| Independent                                    | *       | 3   | Minus | *** 3                                       | =                |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |         |   |       | <input type="checkbox"/>                    |                  |

SMALL ENTITY  
OR OTHER THAN  
SMALL ENTITY

|                  |                        |                     |                        |
|------------------|------------------------|---------------------|------------------------|
| RATE             | ADDI-<br>TIONAL<br>FEE | RATE                | ADDI-<br>TIONAL<br>FEE |
| X\$ 9=           |                        | OR X\$18=           |                        |
| X43=             |                        | X86=                |                        |
| +145=            |                        | +290=               |                        |
| TOTAL ADDIT. FEE |                        | OR TOTAL ADDIT. FEE |                        |

(Column 1) (Column 2) (Column 3)

| AMENDMENT B                                    |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |
|--|---|---|-------|---|------------------|
|  |   |   |       | Minus                                       | =                |
| Total  | * | 21  | Minus | **  | =                |
| Independent                                    | * | 3   | Minus | ***   | =                |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |   |       | <input type="checkbox"/>                    |                  |

|                  |                        |                     |                        |
|------------------|------------------------|---------------------|------------------------|
| RATE             | ADDI-<br>TIONAL<br>FEE | RATE                | ADDI-<br>TIONAL<br>FEE |
| X\$ 9=           |                        | OR X\$18=           |                        |
| X43=             |                        | X86=                |                        |
| +145=            |                        | +290=               |                        |
| TOTAL ADDIT. FEE |                        | OR TOTAL ADDIT. FEE |                        |

(Column 1) (Column 2) (Column 3)

| AMENDMENT C                                    |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |
|--|---|---|-------|---|------------------|
|  |   |   |       | Minus                                       | =                |
| Total  | * | 21  | Minus | **  | =                |
| Independent                                    | * | 3   | Minus | ***   | =                |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |   |       | <input type="checkbox"/>                    |                  |

|                  |                        |                     |                        |
|------------------|------------------------|---------------------|------------------------|
| RATE             | ADDI-<br>TIONAL<br>FEE | RATE                | ADDI-<br>TIONAL<br>FEE |
| X\$ 9=           |                        | OR X\$18=           |                        |
| X43=             |                        | X86=                |                        |
| +145=            |                        | +290=               |                        |
| TOTAL ADDIT. FEE |                        | OR TOTAL ADDIT. FEE |                        |

- If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
- \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.